Tennessee Valley Authority, Post Office Box 2000, Soddy-Daisy, Tennessee 37384-2000

March 13, 2006

State of Tennessee
Department of Environment and Conservation
Division of Water Pollution Control
Enforcement & Compliance Section
6th Floor, L & C Annex
401 Church Street
Nashville, Tennessee 37243-1534

Attention: Mr. Chip Hannah

Dear Mr. Hannah:

SEQUOYAH NUCLEAR PLANT - DISCHARGE MONITORING REPORT FOR FEBRUARY 2006

Enclosed is the February 2006 Discharge Monitoring Report for Sequoyah Nuclear Plant. Please contact me at (423) 843-6700 if you have any questions or comments.

Sincerely,

Stephanie A. Howard

Stephanie A. Howard
Principal Environmental Engineer
Signatory Authority for
J. Randy Douet
Site Vice President
Sequoyah Nuclear Plant

Enclosure
cc (Enclosure):

Chattanooga Environmental Assistance Center
Division of Water Pollution Control
State Office Building, Suite 550
540 McCallie Avenue
Chattanooga, Tennessee 37402-2013

U.S. Nuclear Regulatory Commission
ATTN: Document Control Desk
Washington, D.C. 20555

IE25

Printed on recycled paper

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
Name TVA - SEQUOYAH NUCLEAR PLANT
Address P.O. BOX 2000
(INTEROFFICE SB-2A)
SODDY - DAISY TN 37384
Facility TVA - SEQUOYAH NUCLEAR PLANT
Location HAMILTON COUNTY

ATTN: Stephanie A. Howard

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

TN0026450	101 G
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
From	06	02	01	To	06	02	28

MAJOR
(SUBR 01)
F - FINAL
DIFFUSER DISCHARGE
EFFLUENT

*** NO DISCHARGE ☐ ***

Form Approved.
OMB No. 2040-0004

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TEMPERATURE, WATER DEG. CENTIGRADE	SAMPLE MEASUREMENT	********	********	**	********	********	11.7	04	0	28 / 28	MODELD
00010 Z 0 0 INSTREAM MONITORING	PERMIT REQUIREMENT	********	********	****	********	********	30.5 DAILY MX	DEG. C.		SEE PERMIT	CK REQ
TEMPERATURE, WATER DEG. CENTIGRADE	SAMPLE MEASUREMENT	********	********	**	********	********	24.1	04	0	28 / 28	RCORDR
00010 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	********	********	****	********	********	REPORT DAILY MX	DEG. C.		SEE PERMIT	CK REQ
TEMP. DIFF. BETWEEN SAMP. & UPSTRM DEG.C	SAMPLE MEASUREMENT	********	********	**	********	********	2.9	04	0	28 / 28	CALCTD
00016 1 W 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	********	********	****	********	********	5.0 DAILY MX	DEG. C.		CONTINUOUS	CALCTD
PH	SAMPLE MEASUREMENT	********	********	**	7.5	********	7.7	12	0	4 / 28	GRAB
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	********	********	****	6.0 MINIMUM	********	9.0 MAXIMUM	SU		WEEKLY	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	********	********	**	********	4	4	19	0	1 / 28	GRAB
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	********	********	****	********	30 MO AVG	100 DAILY MX	MG/L		MONTHLY	GRAB
OIL AND GREASE	SAMPLE MEASUREMENT	********	********	**	********	<5	<5	19	0	1 / 28	GRAB
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	********	********	****	********	15 MO AVG	20 DAILY MX	MG/L		MONTHLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	********	1557	03	********	********	********	**	0	28 / 28	RCORDR
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	********	REPORT DAILY MX	MGD	********	********	********	****		CONTINUOUS	RCORDR

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
J. Randy Douet Site Vice President TYPED OR PRINTED	I Certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Stephanie A. Howard Principal Environmental Engineer SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	423 AREA CODE	843-6700 NUMBER	06 YEAR	03 MO	13 DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

No closed mode operation. CCW data for February is attached. Veliger monitoring information is attached. The flow rate characteristics through the diffusers were last calibrated for the previous permit cycle on 4/23/2003; and then again for the current permit cycle on 3/07/2006 (report attached).

CCW TRENCH

Date/Time Collected	Extractable Petroleum Hydrocarbons	Analysis Date/Time	Analyst	Method
02/01/2006 @ 0740	< 0.5	02/08/2006 @ 2008	CVS	EPA 8015B

CCW CHANNEL

Date/Time Collected	Extractable Petroleum Hydrocarbons	Analysis Date/Time	Analyst	Method
02/01/2006 @ 0745	< 0.5	02/08/2006 @ 1930	CVS	EPA 8015B

Sample Date	Mean # of ZM/m^3	% Settlers	Water Temp. (°C)	Sample Date	Mean# of Asiatic Clams/m^3	Water Temp. (°C)	LOCATION	SUB LOCATION	NOTES: % Gravid Asiatic Clam	COLLECTED BY
01/06/2006	0	0	7.5	01/06/2006	0	7.5	Inplant			Dickie Adcock
01/12/2006	0	0	8	01/12/2006	0	8	Inplant			Dickie Adcock
01/20/2006	19	100	8	01/20/2006	19	8	Inplant			CFT
01/26/2006	17	100	8	01/26/2006	0	8	Inplant			Dickie Adcock
02/01/2006	17	100	8	02/01/2006	0	8	Inplant			Dickie Adcock
02/07/2006	0	0	9	02/07/2006	0	9	Inplant			Dickie Adcock
02/14/2006	0	0	8	02/14/2006	167	8	Inplant			Dickie Adcock
02/22/2006	0	0	9	02/22/2006	32	9	Inplant			Dickie Adcock
03/03/2006	32	50	9	03/03/2006	16	9	Inplant			Dickie Adcock

S58 060310 800 – NPDES Correspondence

March 10, 2006

Stephanie Howard, SB 2A-SQN

SEQUOYAH NUCLEAR PLANT DIFFUSER DISCHARGE CALIBRATION

As required by NPDES Permit TN0026450, we have performed another calibration of the diffuser discharge for Outfall 101. The test was conducted on March 7, 2006. A summary of all tests from 1986 through 2006 is given in Attachment 1. A plot of the rating curve currently used to compute the flow through the diffusers to the Tennessee River is given in Attachment 2. Data for the 2006 test is highlighted. As shown, the 2006 results fall within the maximum "error" limits of ±10 percent. This demonstrates that the hydraulic characteristics of the diffusers continue to remain stable and provide a good method of measuring the discharge from the plant. There is no need to update the rating curve at this time.

If you have any questions regarding this work, please call me at 423-632-2881.

Original signed by Paul N. Hopping

Paul N. Hopping
Technical Specialist
River Scheduling
WT 10B-K

PNH:CEG
Attachments
cc (Attachments):
Charles L. Bach, WT 10B-K
Ann Hurt, SB 2A-SQN

EDMS, WT 10C-K

Attachment 1

Calibration Data for SQN Diffuser Discharge, 1986 – 2006

Test Date	Number Of Pumps		Field Measurements				
			Discharge Measurement Method [A]	Water Surface Elevation [B]		Diffuser Head H	Diffuser Discharge Q
				Diffuser Pond	River		
	CCW	ERCW		(feet MSL)	(feet MSL)	(feet)	(cfs)
12/18/1986	2	4	MM	678.03	677.00	1.03	889
12/17/1986	3	4	MM	678.46	676.90	1.56	1,297
12/18/1986	4	4	MM	680.41	676.90	3.51	1,686
12/19/1986	6	4	MM	683.53	677.17	6.36	2,490
03/28/1989	5	4	MM	680.80	676.46	4.34	2,015
03/29/1989	5	4	MM	680.82	676.35	4.47	2,161
03/22/1990	2	3	MM	678.44	677.27	1.17	943
04/05/1990	3	4	MM	680.57	678.54	2.03	1,470
10/05/1990	3	4	MM	682.30	680.20	2.10	1,457
12/19/1990	6	4	MM	682.54	676.26	6.28	2,350
04/03/1991	6	4	MM	684.20	678.18	6.02	2,511
05/22/1991	6	4	MM	688.70	682.60	6.10	2,451
12/10/1991	5	4	MM	682.70	677.90	4.80	2,213
04/10/1992	2	3	MM	680.13	679.12	1.01	879
02/18/1994 [C]	2	3	MM	679.42	678.13	1.29	871
06/14/1994	6	4	MM	688.50	682.00	6.50	2,507
04/03/1997 [D]	3	3	MM	679.50	677.30	2.20	1,223
05/23/1997	6	3	MM	688.40	681.80	6.60	2,551
05/06/1998	6	3	ADCP	688.20	681.70	6.50	2,345
05/11/1999	6	3	ADCP	689.20	682.60	6.60	2,274
10/10/2001	6	3	ADCP	687.10	680.30	6.80	2,359
07/272002	6	4	ADCP	689.40	682.40	7.00	2,759
04/23/2003	3	4	ADCP	684.05	682.20	1.85	1,552
03/07/2006	6	3	ADCP	682.06	675.97	6.09	2,511

Notes:

(A) MM=Marsh-McBirney instrumentation. ADCP=Acoustic Doppler Current Profiler instrumentation.

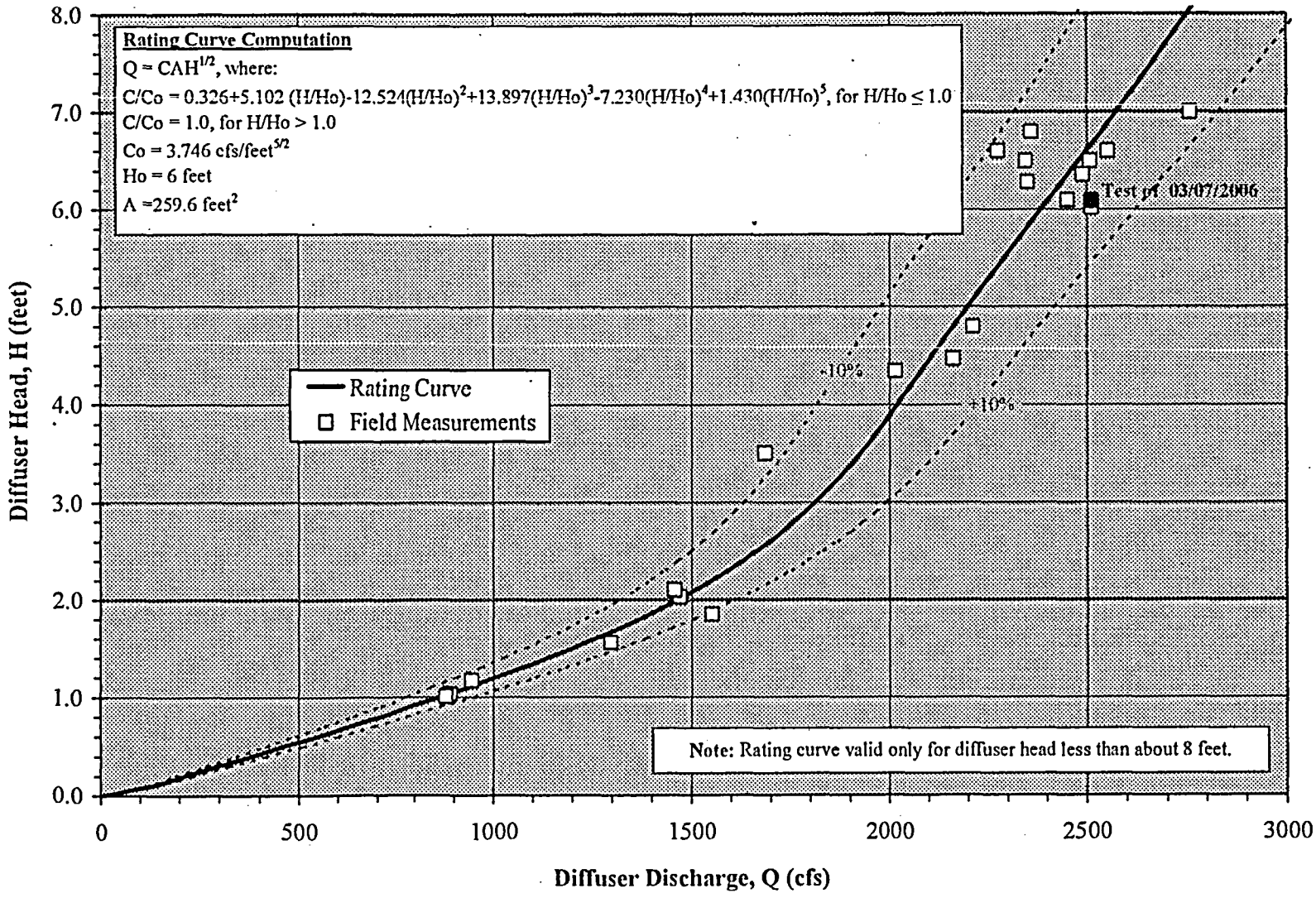
(B) The diffuser pond and river water surface elevations were recorded by instrumentation of the SQN Environmental Data Station. MSL=Mean Sea Level.

(C) The test for 02/18/94 was performed after high rainfall and under very windy conditions. Due to the potential bias of these conditions, the resulting measurements are not used to determine the head-discharge rating curve for the diffuser discharge.

(D) The test of 04/03/97 included a malfunction of the Marsh-McBirney compass, which prohibited the collection of data for flow direction. The diffuser discharge is based on an assumed flow direction. Due to the potential bias of this assumption, the resulting measurements are not used to determine the head-discharge rating curve for the diffuser discharge.

Attachment 2

Rating Curve for SQN Diffuser Discharge



PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

Name: TVA - SEQUOYAH NUCLEAR PLANT
Address: P.O. BOX 2000
(INTEROFFICE SB-2A)
SODDY - DAISY TN 37384
Facility: TVA - SEQUOYAH NUCLEAR PLANT
Location: HAMILTON COUNTY

ATTN: Stephanie A. Howard

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

TN0026450	101 G
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
From	06	02	01	To	06	02	28

MAJOR
(SUBR 01)
F - FINAL
DIFFUSER DISCHARGE
EFFLUENT

*** NO DISCHARGE [ ] ***

Form Approved.
OMB No. 2040-0004

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	********	********	**	********	<0.019	0.040	19	0	34 / 28	GRAB
50060 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	********	********	****	********	0.10 MO AVG	0.10 INST MAX	MG/L		WEEK-DAYS	CALCTD
TEMPERATURE - C, RATE OF CHANGE	SAMPLE MEASUREMENT	********	0.4	62	********	********		**	0	28 / 28	CALCTD
82234 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	********	2.0 DAILY MX	DEG C/HR	********	********	********	****		CONTINUOUS	CALCTD
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
J. Randy Douet Site Vice President	I Certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Stephanie A. Howard Principal Environmental Engineer	423	843-6700	06	03	13
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

The following injections occured: 1. PCL-222 Copolymer (max. calc. conc. was 0.005mg/L--limit 0.2mg/L) 2. PCL-222 Phosphate (max. calc. conc. was 0.013mg/L--limit 0.2mg/L) 3. Biodetergent 73551 (max. calc. conc. was 0.012mg/L--limit 2.0mg/L) 4. PCL-401 (max. calc. conc. was 0.008mg/L--limit 0.2mg/L)

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

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SODDY - DAISY TN 37384
Facility TVA - SEQUOYAH NUCLEAR PLANT
Location HAMILTON COUNTY

ATTN: Stephanie A. Howard

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

TN0026450	101 T
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
From	06	02	01	To	06	02	28

MAJOR
(SUBR 01)
F - FINAL
BIOMONITORING FOR OUTFALL 101
EFFLUENT

*** NO DISCHARGE ☐ ***

Form Approved.
OMB No. 2040-0004

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
IC25 STATRE 7DAY CHR CERIODAPHNIA	SAMPLE MEASUREMENT	********	********	**	Monitoring Not Required	********	********	23			
TRP3B 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	********	********	****	45.2 MINIMUM	********	********	PERCENT		SEE PERMIT	COMPOS
IC25 STATRE 7DAY CHR PIMEPHALES	SAMPLE MEASUREMENT	********	********	**	Monitoring Not Required	********	********	23			
TRP6C 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	********	********	****	45.2 MIMINUM	********	********	PERCENT		SEE PERMIT	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
J. Randy Douet Site Vice President	I Certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Stephanie A. Howard Principal Environmental Engineer	423	843-6700	06	03	13
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

Toxicity was not sampled in February 2006.

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

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(INTEROFFICE SB-2A)
SODDY - DAISY TN 37384
Facility: TVA - SEQUOYAH NUCLEAR PLANT
Location: HAMILTON COUNTY

ATTN: Stephanie A. Howard

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

TN0026450	103 G
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
From	06	02	01	To	06	02	28

MAJOR
(SUBR 01)
F - FINAL
LOW VOL. WASTE TREATMENT POND
EFFLUENT

*** NO DISCHARGE [ ] ***

Form Approved.
OMB No. 2040-0004

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PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	********	********	**	7.0	********	8.5	12	0	11 / 28	GRAB
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	********	********	**	6.0 MINIMUM	********	9.0 MAXIMUM	SU		THREE/ WEEK	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	71	94	26	********	8	10	19	0	4 / 28	GRAB
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	380 MO AVG	1250 DAILY MX	LBS/DY	********	30 MO AVG	100 DAILY MX	MG/L		WEEKLY	GRAB
OIL AND GREASE	SAMPLE MEASUREMENT	<42	<47	26	********	<5	<5	19	0	4 / 28	GRAB
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	190 MO AVG	250 DAILY MX	LBS/DY	********	15 MO AVG	20 DAILY MX	MG/L		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.976	1.408	03	********	********	********	**	0	28 / 28	TOTALZ
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MX	MGD	********	********	********	**		SEE PERMIT	TOTALZ
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
J. Randy Douet Site Vice President	I Certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Stephanie A. Howard Principal Environmental Engineer SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	423	843-6700	06	03	13
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

The LVWTP was isolated from 2/9/06 @ 1331 to 2/13/06 @ 1307.

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
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(INTEROFFICE SB-2A)
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Facility TVA - SEQUOYAH NUCLEAR PLANT
Location HAMILTON COUNTY

ATTN: Stephanie A. Howard

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

TN0026450	107 G
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
From	06	02	01	To	06	02	28

MAJOR
(SUBR 01)
F - FINAL
METAL CLEANING WASTE POND
EFFLUENT

*** NO DISCHARGE XX ***

Form Approved.
OMB No. 2040-0004

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PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	********	********	**		********		12			
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	********	********	****	6.0 MINIMUM	********	9.0 MAXIMUM	SU		DAILY	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	********	********	**	********	********		19			
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	********	********	****	********	********	30 DAILY MX	MG/L		DAILY	COMPOS
OIL AND GREASE	SAMPLE MEASUREMENT	********	********	**	********	********		19			
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	********	********	****	********	********	15 DAILY MX	MG/L		DAILY	GRAB
PHOSPHORUS, TOTAL (AS P)	SAMPLE MEASUREMENT	********	********	**	********	********		19			
00665 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	********	********	****	********	********	1.0 DAILY MX	MG/L		DAILY	COMPOS
COPPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	********	********	**	********	********		19			
01042 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	********	********	****	********	********	1.0 DAILY MX	MG/L		DAILY	COMPOS
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	********	********	**	********	********		19			
01045 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	********	********	****	********	********	1.0 DAILY MX	MG/L		DAILY	COMPOS
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT			03	********	********	********	**			
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MX	MGD	********	********	********	****		DAILY	CALCTD

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
J. Randy Douet Site Vice President	I Certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Stephanie A. Howard Principal Environmental Engineer	423	843-6700	06	03	13
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*
No Discharge this Period

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
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Location HAMILTON COUNTY

ATTN: Stephanie A. Howard

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

TN0026450	110 G
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
From	06	02	01	To	06	02	28

MAJOR
(SUBR 01)
F - FINAL
RECYCLED COOLING WATER
EFFLUENT

*** NO DISCHARGE XX ***

Form Approved.
OMB No. 2040-0004

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
TEMPERATURE, WATER DEG. CENTIGRADE	SAMPLE MEASUREMENT	********	********	04	********	********		04			
00010 Z 0 0 INSTREAM MONITORING	PERMIT REQUIREMENT	********	********	DEG C	********	********	38.3 DAILY MX	DEG C		DAILY	GRAB-4
PH	SAMPLE MEASUREMENT	********	********	**		********		12			
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	********	********	****	6.0 MINIMUM	********	9.0 MAXIMUM	SU		WEEKLY	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	********	********	**	********	********		19			
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	********	********	****	********	********	30 DAILY MX	MG/L		DAILY	COMPOS
OIL AND GREASE	SAMPLE MEASUREMENT	********	********	**	********	********		19			
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	********	********	****	********	********	15 DAILY MX	MG/L		DAILY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT			03	********	********	********	**			
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MX	MGD	********	********	********	****		DAILY	CALCTD
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	********	********	**	********	********		19			
50060 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	********	********	****	********	********	0.10 DAILY MX	MG/L		WEEKLY	GRAB-4
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
J. Randy Douet Site Vice President	I Certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Stephanie A. Howard Principal Environmental Engineer SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	423	843-6700	06	03	13
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*
No Discharge this Period

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

Name TVA - SEQUOYAH NUCLEAR PLANT
Address P.O. BOX 2000
(INTEROFFICE SB-2A)
SODDY - DAISY TN 37384
Facility TVA - SEQUOYAH NUCLEAR PLANT
Location HAMILTON COUNTY

ATTN: Stephanie A. Howard

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

TN0026450	110 T
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
From	06	02	01	To	06	02	28

MAJOR
(SUBR 01)
F - FINAL
RECYCLED COOLING WATER
EFFLUENT

*** NO DISCHARGE XX ***

Form Approved.
OMB No. 2040-0004

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
IC25 STATRE 7DAY CHR CERIODAPHNIA	SAMPLE MEASUREMENT	********	********	**		********	********	23			
TRP3B 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	********	********	****	45.2 MINIMUM	********	********	PERCENT		SEMI ANNUAL	COMPOS
IC25 STATRE 7DAY CHR PIMEPHALES	SAMPLE MEASUREMENT	********	********	**		********	********	23			
TRP6C 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	********	********	****	45.2 MINIMUM	********	********	PERCENT		SEMI ANNUAL	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
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TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

No Discharge this Period

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

Name TVA - SEQUOYAH NUCLEAR PLANT
Address P.O. BOX 2000
(INTEROFFICE SB-2A)
SODDY - DAISY TN 37384
Facility TVA - SEQUOYAH NUCLEAR PLANT
Location HAMILTON COUNTY

ATTN: Stephanie A. Howard

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

TN0026450	116 G
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
From	06	02	01	To	06	02	28

MAJOR
(SUBR 01)
F - FINAL
BACKWASH
EFFLUENT

*** NO DISCHARGE [ ] ***

Form Approved.
OMB No. 2040-0004

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
DEBRIS, FLOATING (SEVERITY)	SAMPLE MEASUREMENT	********	********	**	********	********	0	9A	0	1 / 28	VISUAL
01345 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	********	********	****	********	********	REPORT MO TOTAL	PASS=0 FAIL=1		SEE PERMIT	VISUAL
OIL AND GREASE VISUAL	SAMPLE MEASUREMENT	********	0	94	********	********	********	**	0	1 / 28	VISUAL
84066 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	********	REPORT MO TOTAL	YES=1 NO=0	********	********	********	****		SEE PERMIT	VISUAL
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
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TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

Operations performs visual inspections for floating debris and oil and grease during all backwashes.

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
Name TVA - SEQUOYAH NUCLEAR PLANT
Address P.O. BOX 2000
(INTEROFFICE SB-2A)
SODDY - DAISY TN 37384
Facility TVA - SEQUOYAH NUCLEAR PLANT
Location HAMILTON COUNTY

ATTN: Stephanie A. Howard

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

TN0026450	117 G
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
From	06	02	01	To	06	02	28

MAJOR
(SUBR 01)
F - FINAL
BACKWASH
EFFLUENT

*** NO DISCHARGE [ ] ***

Form Approved.
OMB No. 2040-0004

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
DEBRIS, FLOATING (SEVERITY)	SAMPLE MEASUREMENT	********	********	**	********	********	0	9A	0	1 / 28	VISUAL
01345 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	********	********	****	********	********	REPORT MO TOTAL	PASS=0 FAIL=1		SEE PERMIT	VISUAL
OIL AND GREASE VISUAL	SAMPLE MEASUREMENT	********	0	94	********	********	********	**	0	1 / 28	VISUAL
84066 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	********	REPORT MO TOTAL	YES=1 NO=0	********	********	********	****		SEE PERMIT	VISUAL
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
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	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
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TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*
Operations performs visual inspections for floating debris and oil and grease during all backwashes.

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

Name TVA - SEQUOYAH NUCLEAR PLANT
Address P.O. BOX 2000
(INTEROFFICE SB-2A)
SODDY - DAISY TN 37384
Facility TVA - SEQUOYAH NUCLEAR PLANT
Location HAMILTON COUNTY

ATTN: Stephanie A. Howard

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*

TN0026450	118 G
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
From	06	02	01	To	06	02	28

MAJOR
(SUBR 01)
F - FINAL
WASTEWATER & STORM WATER
EFFLUENT

*** NO DISCHARGE XX ***

Form Approved.
OMB No. 2040-0004

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
OXYGEN, DISSOLVED (DO)	SAMPLE MEASUREMENT	********	********	**		********	********	19			
00300 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	********	********	****	2.0 DAILY MN	********	********	MG/L		TWICE/ WEEK	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	********	********	**	********	********		19			
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	********	********	****	********	********	100 DAILY MX	MG/L		TWICE/ WEEK	GRAB
SOLIDS, SETTLEABLE	SAMPLE MEASUREMENT	********	********	**	********	********		25			
00545 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	********	********	****	********	********	1.0 DAILY MX	ML/L		ONCE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT			03	********	********	********	**			
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MX	MGD	********	********	********	*		ONCE/ BATCH	ESTIMA
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
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TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

During this reporting period, there has been no flow from the Dredge Pond other than that resulting from rainfall.